

SAINT CHARLES FIRE

CO-PSF-001717 – P2 QP9D (0212)

SATURDAY, OCTOBER 28, 2023

Day Operational Period 0700 – 2100

Night Operational Period 1800 – 0000



Rocky Mountain CIMT1

Dan Dallas, IC

Phil Daniels, Deputy


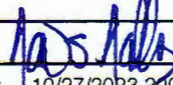
PUBLIC FIRE INFORMATION: 970.628.0130

DAY OPERATIONAL PERIOD BRIEFING: 929.336.2435 Mtg ID: 141496128#

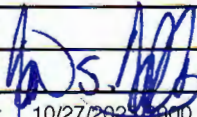
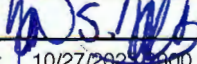


IAPs, Maps,
Check In / Demob
Finance Forms

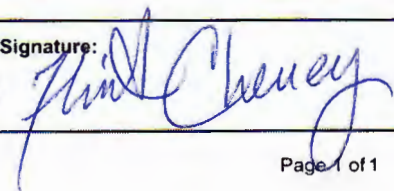
INCIDENT OBJECTIVES (ICS 202)

1. Incident Name:	2. Operational Period: DAY	
SAINT CHARLES	Date/Time From: 10/28/2023 0700 SAT	Date/Time To: 10/28/2023 2100 SAT
3. Objective(s):		
Objectives for Firefighters and Public Safety		
<ul style="list-style-type: none"> • Reduce risk to incident personnel and the public through a strategic risk management process and risk analysis in which values are identified and prioritized and includes conversations on tradeoffs with Agency Administrators, partners, and stakeholders. Take into consideration consequences of a low probability weather event that may lead to a long duration fire. • Minimize the spread of infectious diseases by following CDC guidance and following good personal hygiene practices. 		
Objectives for Protection of Values at Risk		
<ul style="list-style-type: none"> • Utilize a full suppression strategy to minimize negative impacts to values at risk including the communities of Aspen Acres, Lake Isabel, Pine Hill Estates, Popes Snowslide Valley Estates, the Boy Scout Camp, Lake Isabel Work Center and the associated infrastructure that it serves, private structures and homes, powerline infrastructure, and cultural resources. • Protect natural resources including Mexican Spotted Owl habitat in St. Charles drainage by limiting fire intensities that would kill the overstory. • Coordinate with READs on suppression planning to avoid potentially damaging suppression activities to natural and cultural resources. • Mop-up to the extent necessary to lessen the likelihood of escape. Ensure Agency Administrators are involved in discussions when this will occur. • Utilize cost containment principles by managing costs commensurate with values at risk. • Utilize "light hand" suppression tactics on private property to minimize surface disturbances and erosion. 		
Objectives for Information and Relationships		
<ul style="list-style-type: none"> • Provide timely and accurate information to Agency Administrators, cooperators, stakeholders, the public, County Sheriff's Office/Emergency Operations, and the media. • Maintain and enhance relationships with Pueblo and Custer Counties, elected officials, stakeholders, cooperators, and local communities. 		
4. Operational Period Command Emphasis:		
<ul style="list-style-type: none"> • Manage risk to firefighters by ensuring hazards are identified, assessed, and mitigated, where possible. Ensure this risk is communicated. Be prepared to accept residual risk when values threatened warrant it and the probability of achieving objectives is high. • Utilize strategies and tactics that commit responders only to the operations where and when they can be successful, and under conditions where important values at risk are protected with the least exposure necessary. • Coordinate and communicate with residents, local cooperators, stakeholders, and media regarding the fire situation using media, press releases, social media, and personal contacts. • Manage human resources assigned to the fire in a manner that promotes a positive and harassment-free work environment. A "no tolerance" policy is expected for harassment, alcohol, or illegal drug use. 		
General Situational Awareness:		
<ul style="list-style-type: none"> • Maintain good situation awareness while working in steep rugged terrain and areas of snags. • Identify escape routes and safety zones and ensure good communication is maintained. • Make sure you know who you are working for with the transfer of command. • Make provisions for changing weather / potential freezing temperatures for personnel and equipment. 		
7. Prepared by: MARTY KREPFL	Position/Title: PSCC	Signature: 
8. Approved by Incident Commander:	Name: DAN DALLAS	Signature: 
ICS 202	IAP Page	Date/Time: 10/27/2023 2000

INCIDENT OBJECTIVES (ICS 202)

1. Incident Name:		2. Operational Period: DAY	
SAINT CHARLES		Date/Time From: 10/28/2023 0700 SAT	Date/Time To: 10/28/2023 2100 SAT
5. Site Safety Plan Required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Approved Site Safety Plan(s) Located			
6. Incident Action Plan (the items checked below are included in this Incident Action Plan):			
<input checked="" type="checkbox"/> ICS 202	<input type="checkbox"/> ICS 207	Other Attachments:	
<input checked="" type="checkbox"/> ICS 203	<input checked="" type="checkbox"/> ICS 208	<input type="checkbox"/>	_____
<input checked="" type="checkbox"/> ICS 204	<input checked="" type="checkbox"/> ICS 220	<input type="checkbox"/>	_____
<input checked="" type="checkbox"/> ICS 205	<input checked="" type="checkbox"/> Map/Chart	<input type="checkbox"/>	_____
<input type="checkbox"/> ICS 205A	<input checked="" type="checkbox"/> Weather Forecast/Tides/Currents	<input type="checkbox"/>	_____
<input checked="" type="checkbox"/> ICS 206			
7. Prepared by: MARTY KREPFL		Position/Title: PSCC	Signature: 
8. Approved by Incident Commander:		Name: DAN DALLAS	Signature: 
ICS 202	IAP Page	Date/Time: 10/27/2023 2000	

ORGANIZATION ASSIGNMENT LIST (ICS 203)

1. Incident Name:		2. Operational Period: DAY	
SAINT CHARLES		Date/Time From: 10/28/2023 0700	Date/Time To: 10/28/2023 2100 SAT
3. Incident Commander(s) and Command Staff:		6. Logistics Section:	
IC/UC	DAN DALLAS	CHIEF	KEITH PLAGEMANN LEWIS BOWMAN (T)
DEPUTY	PHIL DANIELS	DEPUTY	BRENT SPENCER
SAFETY OFFICER	DAVID VITWAR DAMON MCRAE	SUPPLY UNIT	ROBIN BROOKS BITSY STILLER
MEDICAL UNIT	GREG BERGIN; JEFF CHILDERS NEIL MEACH (T)	FACILITIES UNIT	MICHAEL BURCHARD
INFORMATION OFFICER	BRENDA BOWEN MICHELLE EHN KELLY	GROUND SUPPORT UNIT	KEN HEHR
LIAISON OFFICER	TAMMY RANDALL-PARKER; KEITH EATON (T) BRIAN NIELSON; TARA UMPHRIES (T)	COMMUNICATIONS UNIT	BARRY MATHIAS
FIREFIGHTER HEALTH COORDINATOR	SUSAN KOLP	SECURITY UNIT	LARRY GRISEDALE
		FOOD UNIT	COLLEEN GALLAGHER
		ORDERING MANAGER	MARIE BUTLER
4. Agency/Organization Representative(s):		7. Operations Section:	
Agency/Organization	Name	OPS SECTION CHIEF	SCOTT BEACHAM
USFS/PSICC DEPUTY FOREST SUPERVISOR	JIM PITTS	FIELD OPERATIONS	TIM DALY SKIP SIMMONS (T)
USFS SAN CARLOS DISTRICT RANGER	DESTINY CHAPMAN	PLANNING OPS	HECTOR MEDRANO
PIKE SAN ISABEL NF FIRE STAFF OFFICER	BILL KING		
PUEBLO COUNTY SHERIFF'S DEPT	JOSHUA JOHNSON MARK MEARS	DIVISION/GROUP A	ERIC PANEBAKER
CUSTER COUNTY SHERIFF'S DEPT	RICH SMITH	DIVISION/GROUP D	TERRY MCSHANE
RYE FIRE CHIEF	STEVE BENNETT	DIVISION/GROUP K	CODY ROSE
		DIVISION/GROUP T	KEITH BEDONIE JUSTIN MCARTHUR (T)
		DIVISION/GROUP STRUCTURE	STEVEN THIME
		DIVISION/GROUP NIGHT	TOM KENNY
5. Planning Section:		7b. Air Operations Branch:	
CHIEF	MARTY KREPFL AMY RUSSELL (V)	AIR OPS BRANCH DIRECTOR	KELLY RUDGER
RESOURCES UNIT	TERI PARVIN; FLINT CHENEY DARBY JOHNSON (V)	AIR SUPPORT SUPERVISOR	MICHAEL SPINK
SITUATION UNIT	THAD MCKAIN	AIR ATTACK SUPERVISOR	BOB LEIGHTY JONNIE VANDERHOEVEN
CHECK-IN / DEMOB UNIT	GAYLE LAURENT		
FIRE BEHAVIOR ANALYST	GLEN LEWIS		
GIS SPECIALIST	JEN AVESING; PAUL HOFFLER BRICE CULBERTSON (T)	8. Finance/Administration Section:	
TECHNOLOGY SUPPORT SPECIALIST	MARTY KREPFL	CHIEF	DAVID LUCAS PJ TILLMAN
AIR RESOURCE ADVISOR	MARLENE DEPIETRO	DEPUTY	DENISE TOMLIN MEGAN JACKSON (V)
INCIDENT METEOROLOGIST	SHAWN SMITH	TIME UNIT	DALE HARRISON
TRAINING SPECIALIST	AMY DANIELS	PROCUREMENT UNIT	SARAH BOYD
		COMPENSATION UNIT	CASEY WARREN
		COST UNIT	MICHAEL JACOBS
9. Prepared By:	Name: F CHENEY	Position/Title: RESL	Signature:
ICS 203	IAP Page	Date/Time: 10/27/2023 0850	



INCIDENT Weather Forecast



Forecast No: 1
Prediction For: Saturday
Shift Date: October 28, 2023
Forecast Issued: October 27, 2023 at 1700

Name of Incident: Saint Charles Fire
Unit: San Isabel NF
Incident Meteorologist: Shawn Smith
 (240) 778-5293

Discussion: Gusty southwesterly winds are expected today with relative humidity slipping down into the 40% range ahead of a cold front. This front will bring a blast of winter weather to the area tonight into Sunday with a substantial drop in temperatures and a few inches of snow expected as winds turn easterly. Temperatures should push near 50 today before falling below freezing tonight and likely remaining below freezing Sunday and Monday over the fire.

Forecast for Today:

Sky/Weather: Mostly sunny with gusty winds. Snow arriving tonight and turning very cold.

	<u>ICP 4,700'</u>		<u>Fire 8600'</u>	
Max Temperature:	52		46	°F
Min RH:	40		47	%
Wind (20 FT):	Southwesterly winds becoming Easterly with cold front passage.			
...	SW>ENE	15	SW>ENE	17 mph
...	Gusts:	25	Gusts:	29 mph
Transport Wind:	E	15	SW	20 kt
Mixing Height:	3,500		5,500	ft AGL
Haines Index:	3		3	
Chance of Precipitation:	20		40	%
Tonight's Min Temperature:	19		14	°F
Tonight's Max RH:	84		89	%
Tonight's Wind (20 FT):	Easterly winds with snow.			
...	E	5	ESE	4 mph
...	Gusts:	15	Gusts:	7 mph
Tonight's Transport Wind:	E	10	SE	10 kt
Tonight's Mixing Height:	3,000		1,500	ft AGL
Tonight's Haines Index:	3		3	
Tonight's Chnc of Precip:	60		85	%

Forecast for Sunday:

Winter Weather Advisory 0000-1800

Sky/Weather: Cloudy and very cold with a few inches of snow expected.

	<u>ICP 4,700'</u>		<u>Fire 8600'</u>	
Max / Min Temperature:	34	13	19	8 °F
Min / Max RH:	62	90	76	100 %
Wind (20 FT):	Easterly winds with snow.			
...	NE	10	ENE	10 mph
...	Gusts:	20	Gusts:	20 mph
Transport Wind:	NE	13	ENE	8 kt
Mixing Height:	4,000		2,500	ft AGL
Haines Index:	2		Precip Chance:	85

Extended Outlook:

High pressure will bring an extended period of dry weather with mostly sunny skies following the winter blast. Temperatures will slowly warm back towards normal midweek. Relative humidity will dip toward critical range by Wednesday but strong winds are not expected.

		<u>Max T</u>	<u>Min T</u>	<u>Min RH</u>	<u>Max RH</u>	<u>Ridge Winds @ 1500</u>	<u>Weather</u>
Saint Charles Fire 8,600'	Mon:	32	11	46	56	S @ 5 G9	Sunny and cold.
	Tue:	34	17	40	47	SSW @ 7 G13	Sunny and cold.
	Wed:	46	23	27	38	WNW @ 8 G14	Sunny and drier.

Prepare for winter weather on Sunday. Below freezing temperatures and snow expected.

Fire Behavior Forecast # 03

Name of Incident: Saint Charles	Administrative Unit: CO-PSF
Date & Time Issued: 10/27/2023 2000	Operational Period: Day – October 28, 2023
FBAN Glen Lewis	Signed: <i>Glen Lewis</i>

Weather Summary

****See attached weather forecast for details****

Fuels and Topography Summary

Fuels in the fire area are primarily composed of **Timber with Understory** (Mixed Conifers with litter and scattered shrubs), **and Grass with Shrubs** (perennial grasses mixed with brush). Fuel loading is mostly moderate with numerous rocky outcroppings. Steep slopes and drainages occur throughout the fire area, with flat ridgetops occurring immediately North of the fire. These areas have more open fuels. Most ridgetops have a greater peak and generally have the similar timber fuels as the surrounding slopes.

Fire area topography includes steep slopes, and multiple deep drainages with all aspects represented. Elevations in the immediate fire area range from approximately 8,000 to over 9,000 feet.

Local fire danger indices have been and continue to trend above average for this time of year and are near the 90th percentile. Live fuels such as grass and shrubs (oak) have experienced seasonal drying but have also experienced a hard frost, making them available to burn.

Watch for significant topographic influences that can alter weather and fire behavior on a fine scale on this fire.

Fire Behavior Summary

GENERAL:

ERC's are continuing to decline but are still above average for this time of year and are still near the 90th percentile. That is being offset by high overnight recovery and limited solar heating due to the season. The fire has been primarily confined to surface fuels with limited torching and short crown runs due to higher foliar moistures, and that can be expected to continue today.

Continued higher humidity and lower wind speed today will result in low potential rates of spread today and will reduce spotting likelihood and distance as well. The lower temperatures will be slow to dry out fuels given the excellent humidity recovery overnight. Live fuels--particularly oakbrush and grass, will still carry fire under today's conditions but will need to be in alignment for notable fire spread. Timber litter and fine fuels are holding some moisture on the steep northern slopes in the understory and can be expected to slow fire spread. Expect a relatively short active burn period today that begins mid-afternoon. Limited surface fire spread can be anticipated today.

Always base your actions on current and expected fire behavior

Safety

Remember one of the 18 Watch Out Situations - "Unfamiliar with weather and local factors influencing fire behavior".

Division/Group Assignment List (ICS 204 WF)

Controlled Unclassified Information//Basic

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SAINT CHARLES				Branch:		Division/Group	
2. Operational Period: DAY				A			
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4. Operations Personnel							
OPERATIONS CHIEF SCOTT BEACHAM			FIELD OPERATIONS TIM DALY SKIP SIMMONS (T)				
DIVISION/GROUP SUPERVISOR ERIC PANEBAKER			AIR ATTACK SUPERVISOR BOB LEIGHTY JONNIE VANDERHOEVEN				
5. Resources Assigned this Period							
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time	
O-44 TFLD		11/06	LANE OSTENSON	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
TFLD (T)		11/04	M. REATER	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
C-1 CR2I RIFLE PEAK		11/01	JEFF ELLIS	20	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
C-10 CR2I UKONOM		11/08	MAX MURPHY	22	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
O-22 SMOD RGF 61		10/29	BRIAN GOLD	9	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
E-3 ENG6 ADAMS COUNTY BR 11		11/01	MIKE READER	4	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
E-37 ENG6 DOUGLAS COUNTY MODULE		10/31	LUKE ROBERTS	7	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
E-38 ENG6 SCR D E-631		10/28	ANNA DELLAPENTA	6	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
O-32 HEQB		11/06	TROY DODSON	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
O-54 HEQB		11/08	KODI LESLIE	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
E-9 DZR2 CHAPARRAL		11/02	BRIAN JAMESON	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
E-22 DZR3 MOORE'S		11/06	PICKLE TILMON	2	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
E-24 DZR2 KAGAN & SON		11/08	LANE BASIL	2	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
O-14 SOFC (T)		11/02	LEHI VIZCAINO	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
O-23 READ		11/02	JEFF OUTHIER	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
8. Division/Group Communication Summary							
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode	
COMMAND	7	170.4250 N	131.8	168.0750 N	131.8	A	
COMMAND	8	169.5375 N	131.8	164.7125 N	131.8	A	
TACTICAL	3	168.6000 N	131.8	168.6000 N	131.8	A	
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)		Date	Time	
FLINT CHENEY; TERI PARVIN			MARTY KREPFL		10/27/2023	0850	

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4. Operations Personnel						
OPERATIONS CHIEF	SCOTT BEACHAM	FIELD OPERATIONS		TIM DALY SKIP SIMMONS (T)		
DIVISION/GROUP SUPERVISOR	ERIC PANEBAKER	AIR ATTACK SUPERVISOR		BOB LEIGHTY JONNIE VANDERHOEVEN		
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator	LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time	
O-40.1 EMPF	11/05	JASON EYERLY	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
E-8 AMBO1 ERL	11/03	LO LANE	2	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100	
6. Control Operations/Work Assignments:						
TASK: Patrol and monitor fire edge. PURPOSE: Identify and suppress slop-overs and spot fires across existing control lines. END STATE: Fire is patrolled for threatening fires and smokes.						
7. Special Instructions:						
Winterize pumps & engines. Antifreeze is available at ground support. Consolidate unused equipment at DP35.						
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	7	170.4250 N	131.8	168.0750 N	131.8	A
COMMAND	8	169.5375 N	131.8	164.7125 N	131.8	A
TACTICAL	3	168.6000 N	131.8	168.6000 N	131.8	A
9. Prepared By (Resource Unit Leader)		Approved By (Planning Section Chief)		Date	Time	
FLINT CHENEY; TERI PARVIN		MARTY KREPFL		10/27/2023	0850	

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4. Operations Personnel						
OPERATIONS CHIEF SCOTT BEACHAM		FIELD OPERATIONS TIM DALY SKIP SIMMONS (T)				
DIVISION/GROUP SUPERVISOR TERRY MCSHANE		AIR ATTACK SUPERVISOR BOB LEIGHTY JONNIE VANDERHOEVEN				
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
O-56 TFLD		11/08	ERIC MCKENNA	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
O-39 TFLD (T)		10/28	AK YOUNG	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
C-3 CRW1 SIERRA IHC		11/06	ALAN ROBY	25	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
E-12 ENG3 OUTBACK 79		11/04	SEAN WEST	3	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
E-4 ENG6 TIMBERLINE BR 52		11/01	CARL HENRIKSON	3	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
O-33 HEQB		11/05	ADAM MCKEITH	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
O-41 HEQB (T)		11/05	BEN KARBASSI	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
E-18 DZR2 MOORE'S		11/04	ERIC MOORE	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
O-46 SOFC		11/06	RYAN ROMERO	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
AMBO2 FIRESIDE MEDICS		11/05	ROSS BYRD	2	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
6. Control Operations/Work Assignments:						
TASK: Construct direct and indirect fireline.						
PURPOSE: Keep fire from impacting values at risk.						
END STATE: Fireline in the correct location with the right dimensions to contain the fire.						
7. Special Instructions:						
Winterize pumps and engines. Antifreeze is available at ground support.						
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	7	170.4250 N	131.8	168.0750 N	131.8	A
COMMAND	8	169.5375 N	131.8	164.7125 N	131.8	A
TACTICAL	1	168.0500 N	131.8	168.0500 N	131.8	A
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)		Date	Time
FLINT CHENEY; TERI PARVIN			MARTY KREPFL		10/27/2023	0850

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4. Operations Personnel						
OPERATIONS CHIEF SCOTT BEACHAM		FIELD OPERATIONS TIM DALY SKIP SIMMONS (T)				
DIVISION/GROUP SUPERVISOR CODY ROSE		AIR ATTACK SUPERVISOR BOB LEIGHTY JONNIE VANDEROEVEN				
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
O-35 TFLD		11/06	DAN STUCKI	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
C-8 CRW2 J FRANCO REFORESTATION -		11/08	ESEQUIEL TAPIA	20	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
C-9 CRW2 WOODPECKER C-3		11/07	JONATHAN CHANCELLOR	18	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
O-49 HEQB		11/07	CHASE SMITH	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
E-23 DZR2 INDEPENDENT LOG		11/08	DAX MOORE	2	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
E-41 CHP2 FIRE TRAX		11/09	RETO NIKLAUS	3	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
O-82 EMPF		11/08	CHARLES MACHULA	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
6. Control Operations/Work Assignments:						
TASK: Prep indirect fireline between Hwy 165 and DP 68. PURPOSE: Prep indirect fireline. END STATE: Fireline in the correct location with the correct dimensions to contain the fire.						
7. Special Instructions:						
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	7	170.4250 N	131.8	168.0750 N	131.8	A
COMMAND	8	169.5375 N	131.8	164.7125 N	131.8	A
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FLINT CHENEY; TERI PARVIN			MARTY KREPFL		10/27/2023	0850

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OPERATIONS CHIEF		SCOTT BEACHAM		FIELD OPERATIONS		TIM DALY SKIP SIMMONS (T)
DIVISION/GROUP SUPERVISOR		KEITH BEDONIE JUSTIN MCARTHUR (T)		AIR ATTACK SUPERVISOR		BOB LEIGHTY JONNIE VANDEROEVEN
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
C-4 CRW1 LITTLE TUJUNGA IHC		11/05	JB BUNTON	19	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
C-11 CR2I MILLCREEK		11/08	JUSTIN D GRUNEWALD	19	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
O-52 SOF		11/08	BRENT JOHNSON	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
O-99 REMS WEST METRO		11/09	MICHAEL BROUILLETTE	4	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
6. Control Operations/Work Assignments:						
TASK: Scout potential primary and alternate fireline locations. PURPOSE: Identify future fireline placement. END STATE: Fireline with the highest probability of success is identified.						
7. Special Instructions:						
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	7	170.4250 N	131.8	168.0750 N	131.8	A
COMMAND	8	169.5375 N	131.8	164.7125 N	131.8	A
TACTICAL	2	168.2000 N	131.8	168.2000 N	131.8	A
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)		Date	Time
FLINT CHENEY; TERI PARVIN			MARTY KREPFL		10/27/2023	0850

Division/Group Assignment List (ICS 204 WF)

Controlled Unclassified Information//Basic

1. Incident Name:				3.		
SAINT CHARLES				Branch:		Division/Group
2. Operational Period: DAY				STRUCTURE		
Date/Time From: 10/28/2023 0700 SAT		Date/Time To: 10/28/2023 2100 SAT				
4. Operations Personnel						
OPERATIONS CHIEF SCOTT BEACHAM		FIELD OPERATIONS TIM DALY SKIP SIMMONS (T)				
DIVISION/GROUP SUPERVISOR STEVEN THIME		AIR ATTACK SUPERVISOR BOB LEIGHTY JONNIE VANDERHOEVEN				
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator		LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time
O-55 TFLD		11/08	SHANE MCCrackEN	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
O-4 SMOD CORTEZ 23		11/01	TAVIS ANDERSON	5	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
E-11 ENG3 NATIONAL FIRE 412		11/04	BRIAN ENNIS	3	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
E-34 ENG3 SOUTH METRO BR 20		11/08	BRYAN GROGAN	4	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
E-2 ENG6 WEST METRO BR 13		10/31	SHAWN BOTSFORD	3	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
E-32 ENG6 WEST METRO BR SD9		10/29	AARON JOHNSON	3	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
E-25 WTT1 SOUTH ARKANSAS 11		11/05	MELISSA FRIESS	2	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
E-26 WTT1 INDEPENDENT LOG		11/07	RYAN MOORE	2	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
E-17 WTS2 HANOVER 3523		11/04	BRIAN JUNGLEN	2	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
ROAD GUARD			DESIREE HOLLINGSWORTH	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
O-46 SOFC		11/06	RYAN ROMERO	1	PUEBLO FAIRGROUNDS/0700	PUEBLO FAIRGROUNDS/2100
6. Control Operations/Work Assignments:						
TASK: Locate and assess structures. Prep structures as directed and approved by Structure Protection Specialist.						
PURPOSE: Identify mitigation needs to protect structures. Reduce impact to structures.						
END STATE: Structures are defensible. Defensible space is established around structures as needed.						
7. Special Instructions:						
Winterize pumps and engines. Antifreeze is available at ground support.						
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	7	170.4250 N	131.8	168.0750 N	131.8	A
COMMAND	8	169.5375 N	131.8	164.7125 N	131.8	A
TACTICAL	5	166.7750 N	131.8	166.7750 N	131.8	A
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)		Date	Time
F CHENEY			MARTY KREPFL		10/27/2023	0850

Division/Group Assignment List (ICS 204 WF)
 Controlled Unclassified Information//Basic

1. Incident Name:				3.		
SAINT CHARLES				Branch:	Division/Group	
2. Operational Period: DAY						
Date/Time From: 10/28/2023 0700 SAT		Date/Time To: 10/28/2023 2100 SAT		NIGHT		
4. Operations Personnel						
OPERATIONS CHIEF SCOTT BEACHAM		FIELD OPERATIONS TIM DALY SKIP SIMMONS (T)				
DIVISION/GROUP SUPERVISOR TOM KENNY		AIR ATTACK SUPERVISOR				
5. Resources Assigned this Period						
Strike Team / Task Force / Resource Designator	LWD	Leader	Number Persons	Drop Off PT./Time	Pick Up PT./Time	
O-31 TFLD	11/04	DAN BATTIN	1	PUEBLO FAIRGROUNDS/1800	PUEBLO FAIRGROUNDS/2400	
E-15 ENG6 CO SPRINGS 238	11/04	RYAN MORRIS	3	PUEBLO FAIRGROUNDS/1800	PUEBLO FAIRGROUNDS/2400	
E-14 ENG6 CANON CITY 163	10/29	KEVIN EVANS	3	PUEBLO FAIRGROUNDS/1800	PUEBLO FAIRGROUNDS/2400	
E-35 ENG6 COLORADO WFS BR 6	11/07	SCOTT ATTERBERRY	4	PUEBLO FAIRGROUNDS/1800	PUEBLO FAIRGROUNDS/2400	
6. Control Operations/Work Assignments:						
TASK: Patrol and monitor Boy Scout Camp road and Flagpole road. PURPOSE: Minimize impact to structures and values at risk. END STATE: Fire cannot threaten any values at risk.						
7. Special Instructions:						
Winterize pumps and engines. Antifreeze is available at ground support.						
8. Division/Group Communication Summary						
Function	Channel	RX Frequency N/W	RX Tone/NAC	TX Frequency N/W	TX Tone/NAC	Mode
COMMAND	7	170.4250 N	131.8	168.0750 N	131.8	A
COMMAND	8	169.5375 N	131.8	164.7125 N	131.8	A
TACTICAL	5	166.7750 N	131.8	166.7750 N	131.8	A
9. Prepared By (Resource Unit Leader)			Approved By (Planning Section Chief)		Date	Time
F CHENEY			MARTY KREPFL		10/27/2023	0850

AIR OPERATIONS SUMMARY 220		Prepared By: Kelly Rudger	Prepared: 10/27/2023	Prepared Time: 1900
1. INCIDENT NAME: SAINT CHARLES FIRE		2. OPERATIONAL PERIOD 10/28/2023		SUNRISE: 07:22
		START TIME: 0800	END TIME: 1900	SUNSET: 18:05

3. REMARKS: (Safety Notes, Hazards, etc.)		4. READY ALERT AIRCRAFT:		5. TFR: 3/7535 ZDV
<p align="center"><u>AVIATION SAFETY IS A TEAM EFFORT</u></p> <p align="center">AIR OPERATIONS INTENT</p> <p>ALL MISSIONS WILL BE ANALYZED IN TERMS OF HAZARDS AND RISKS</p> <ul style="list-style-type: none"> • THE RISK ASSESSMENT IS AN OPEN PROCESS WELCOMING INPUT. • HAZARDS WILL BE MITIGATED, RISK WILL BE REDUCED. • RISK MANAGEMENT PROCESS WILL BE DOCUMENTED AND DISPLAYED. <p>IF A MISSION FEELS UNSAFE, IDENTIFY SAFE ALTERNATIVES! ***Visibility and high winds, have been a safety issue.***</p>		<p>IA: TBD</p> <p>Medivac: Hoist, Air Ambulances & Life Flight Order Through Communications</p> <p>See Medical Plan in the IAP for Type of Aircraft & Capability</p>		Surface - 12,000' MSL Location: 7NM Radius 18 miles SW of Pueblo, CO

6. PERSONNEL	NAME	PHONE #	7. FREQUENCIES	AM	FM	8A. FIXED-WING Ordering
AOBD	Kelly Rudger	503-341-7225	A/A TFR	119.0500		AIRTANKERS/LEAD PLANES/SEATS: ATGS order through Dispatch
ASGS	Mike Spink	719-258-0365	A/A Rotor	125.1500		8B. Aerial Supervision / Personnel / Location
ASGS-T / HEBM	Daniel Crowell	208-781-0453	A/G Command		167.9500	AIR ATTACK Platforms: Order through Operations / Dispatch
HEBM-T	Calum Murray	720-902-1797	A/G Tactical		169.2000	ATGS Bob Leighty AA 68MU @ PUB
ATGS	Bob Leighty	970-250-0353				ATGS Jonnie VanDerHoeven AA 916JR @ PUB
ATGS	Jonnie VanDerHoeven	480-487-1057				
Pueblo Dispatch	AC Desk	719-553-1607	DECK		168.1000	

9. HELICOPTERS: (Order through ATGS or Operations)

FAA N#	TY	MAKE/MODEL	BASE	START	AVAIL	REMARKS	FAA N#	TY	MAKE/MODEL	BASE	START	AVAIL	REMARKS
356AA	1	UH-60A	1V6	0800	0830	Tanked	205TA	2	B 205 A1++	1V6	0800	0830	IA, Tanked
354E	3	Astar B3	1V6	0800	0830	Recon, PLDO, IA							



10. TASK/MISSION/ ASSIGNMENT (Type/ function includes: Air Tactical, Retardant, Recon, Personnel Transport, Bucket Operations, SAR, etc.)					
TYPE/FUNCTION	PRIORITY	NAME OF PERSONNEL OR CARGO (If applicable) or instructions for tactical aircraft	MISSION START	FLY FROM	FLY TO
ATGS		Provide coverage as smoke or weather permits.	TBD	FBO	Fire
Initial Attack		Support Initial Attack actions as requested.	TBD	TBD	IA
Medevac		**See Medical Plan in IAP – Review during Division Breakouts**	TBD	TBD	Fire
Water Drops		As needed and approved by Operations.	0830	Helibase	Fire
PSD/UAS Operations		As approved in the PSD/UAS plan, where and when needed, determined by Operations.	TBD	TBD	Fire
Recon		Fire reconnaissance by Operations. Priority.	0900	TBD	Fire

<p>Incident Fire Costs:</p> <p>Send Helibase Cumulative Costs & Fixed Wing Costs to: kelly_rudger@firenet.gov & 2023_saintcharlies.finance@firenet.gov</p> <p>(In the email subject indicate whether it's Fixed Wing Costs or Helibase Cumulative Costs)</p> <p>Send Daily Helicopter Costs to: saintcharlieshelibase@gmail.com</p> <p>(In the email subject indicate Helicopter Costs and put N#)</p>	<p>Other Information:</p> <ul style="list-style-type: none"> Track all dipsites and number of buckets and gallons of water daily. New Helispots need to be approved prior to turning them into SITL to be put on maps, run them up through HEBM/ASGS/AOBD. Air Ops & Pilot Maps located at: https://ftp.wildfire.gov/ Helibase is located at Fremont County Airport (1V6) in Canon City.
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Flights above ground level	Wind Restrictions		
	Type 1 Helicopters	Type 2 Helicopters	Type 3 Helicopters
More than 500' AGL	<50kts / Gusts: N/A	<50kts / Gusts: N/A	<50kts / Gusts: N/A
Less than 500' AGL	<40kts / Max Gust Spread: 15kts	<40kts / Max Gust Spread: 15kts	<30kts / Max Gust Spread: 15kts

Controlled Unclassified Information/Basic

Approved by: //s//: Kelly Rudger AOBD Rocky Mountain Team 1

INCIDENT RADIO COMMUNICATIONS PLAN (ICS 205)

Controlled Unclassified Information//Basic

1. Incident Name:		2. Date/Time Prepared:		3. Operational Period:	
SAINT CHARLES		Date: 10/27/2023	Time: 2115	Date/Time From: 10/28/2023 0700	Date/Time To: 10/28/2023 2100
				SAT	SAT

4. Basic Radio Channel Use:										
Zone Group	Ch #	Function	Channel Name/Trunked Radio System Talkgroup	Assignment	RX Freq	RX Tone/NAC	TX Freq	TX Tone/NAC	Mode (A, D, or M)	Remarks
	1	TACTICAL	TAC 1	DELTA	168.0500 N	131.8	168.0500 N	131.8	A	
	2	TACTICAL	TAC 2	TANGO	168.2000 N	131.8	168.2000 N	131.8	A	
	3	TACTICAL	TAC 3	ALPHA	168.6000 N	131.8	168.6000 N	131.8	A	
	4	TACTICAL	TAC 4	KILO	166.7250 N	131.8	166.7250 N	131.8	A	
	5	TACTICAL	TAC 5	STRUCTURE, NIGHT	166.7750 N	131.8	166.7750 N	131.8	A	
	6	TACTICAL	TAC 6	UNASSIGNED	168.2500 N	131.8	168.2500 N	131.8	A	
	7	COMMAND	CMD 7	ALL DIVS	170.4250 N	131.8	168.0750 N	131.8	A	SNOWSLIDE
	8	COMMAND	CMD 8	ALL DIVS	169.5375 N	131.8	164.7125 N	131.8	A	NORTH & EAST FIRE
	9	COMMAND	CMD 9	RESERVED	170.4125 N	131.8	165.9625 N	131.8	A	NOT IN USE
	11	COMMAND	ADOBE		169.9000 N		164.9125 N	156.7	A	FOREST BACKUP
	12	TACTICAL	VFIRE 21	MUTUAL AID	154.2800 N		154.2800 N		A	
	13	TACTICAL	VMED 28	MEDICAL	155.3400 N		155.3400 N		A	
	14	AIR TO GROUND	A/G PRI		167.9500 N		167.9500 N		A	
	15	AIR TO GROUND	A/G SEC		169.2000 N		169.2000 N		A	
	16	AIR GUARD	AIRGUARD		168.6250 N		168.6250 N		A	EMERGENCY USE ONLY

5. Special Instructions:	

6. Prepared By	
(Communications Unit Leader)	Name: BARRY MATHIAS
Signature:	
Date/Time: 10/27/2023 2115	

ICS 205	IAP Page
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Incident Phone & Contact List

Check-In and Demob	720.584.8887
Communications	720.693.2321
CTRs – scanned or pictures	
EMAIL: 2023.saintcharles.finance@firenet.gov	
Finance	720.693.1869
Documentation	
EMAIL: 2023.saintcharles.docs@firenet.gov	
Facilities	720.693.1565
Firefighter Health Coordinator	720.693.3188
Food	615.651.4337
Ground Support	720.693.3323
Information	720.693.2139
ITSS	719.337.6711
Logistics	435.300.0330
Orders – electronic 213s (or picture of written 213)	
EMAIL: 2023.saintcharles.ordering@firenet.gov	
Ordering	843.359.8775
EMAIL: 2023.saintcharles.ordering@firenet.gov	
Supply	307.359.8396
EMAIL: ROCKYMT.CIMT1.SUPPLY@GMAIL.COM	

CHECK-IN AND DEMOB TIPS

CHECK-IN

Submit the electronic check-in form using the QR code on front of IAP and selecting **Incident Check In** from the menu.

Email the following items to 2023.saintcharles.checkin@firenet.gov

- Red card/fire card
- Manifest (Crews)

DEMOB

FOR EMERGENCY OR URGENT DEMOBS CONTACT YOUR SUPERVISOR FIRST AND THEN CONTACT THE DEMOB UNIT DIRECTLY AT 720.584.8887

If you need a flight, please email 2023.saintcharles.demob@firenet.gov 72 hours in advance or call 720.584.8887

After being notified by your supervisor of your tentative release date:

Step 1. Return all supplies, radios, etc. that were checked out.

Step 2. Release Inspection is required for all private contract equipment resources (i.e. Engines, Water Tenders, Heavy Equipment, Transports, etc.)

Step 3. Submit final time documents electronically to Finance per directions in the IAP. Provide a valid email address. Finance will post your time, let you review a draft, and send your final documents to you, all electronically.

Step 4. Complete Demob Checkout Form – accessed by scanning using QR code on the IAP and selecting **Incident Demob** from the menu. Once you submit the form, you are released from the incident and may begin travel home. Safe Travels!

*Any questions about the check-in or demob process, call 720.584.8887
or email 2023.saintcharles.demob@firenet.gov*

SAINT CHARLES FINANCE PROCEDURES

Finance Email: 2023.saintcharles.finance@firenet.gov

Finance Hotline: 720-693-1869

We are requesting that you submit your documents ELECTRONICALLY.

(If you are completing CTRs/Shift Tickets on paper, you can take a picture, save it as a PDF and then email it.)

ALL RESOURCES – When emailing, **please include your RO# in the subject line** and on all documents. Provide a contact phone number in your email.

ADD DOCUMENTATION TO YOUR CTR/ST IN THE "REMARKS" BOX – not just in your email.

****If you are receiving an incident provided lunch, you must DEDUCT this from your per diem. For lunches received, make sure to note it in the remarks section of your shift ticket or CTR.****

At **check-in** submit the following:

- Resource Order
- Manifest/Roster
- Cooperator agreement or contract
(w/ correct resource highlighted)
- AD Casual Hire Form
- Vehicle Inspection Form

Daily submit the following:

- CTRs
- Shift Tickets

Ensure all CTR/Shift Tickets are signed and dated.

For easy document submission, scan the QR codes.

Overhead & Crews:

Use TIME in subject line of email
or QR code below



Contractors & Cooperators:

Use PROC in subject line of email
or QR code below



For questions about claims:

Use COMP in the subject line
of email or QR code below



Demobing soon? We will need the below documents to process your OF-288/286.

At **DEMOB** submit the following:

- Final CTR/Shift Tickets w/ projected travel times
- Release Vehicle Inspection Form

All documents can be EMAILED for a faster, virtual demob process!

Thank you from your Friendly Finance Section! We appreciate your help in keeping your records accurate!

PUBLIC INFORMATION

Does the public or media want a few words?

- The cold weather will not put the fire out but may temporarily diminish fire activity. When warmer temperatures and drier conditions return, fire activity may increase.
- How do you keep the hoses and pumps from freezing? We use antifreeze in the pumps and drain the hoses in advance of the colder temperatures.
- Despite colder temperatures the fire will still be attended and if precipitation does not interfere with safety, firefighters will remain engaged.
- An interactive map the public can use to quickly map the distance from their home to the fire's perimeter is available for quick reference. This is available for use on a mobile device as well as a home computer.

Phone: 970-628-0130 8am-8pm

Facebook: www.facebook.com/SaintCharlesFire

Inciweb: <https://inciweb.nwcg.gov/incident-information/copsf-saint-charles-fire>

Email: 2023.saintcharles@firenet.gov

Text Updates: text SaintCharlesFire to 77295; text and data rates apply

Interactive Map: <https://tinyurl.com/SaintCharlesFireInteractiveMap>



We would love your **photos of the Saint Charles Fire.**

Please send to the Saint Charles Fire email account

at: 2023.saintcharles@firenet.gov



HEALTH AND SAFETY MESSAGE

Communicate – Collaborate – Coordinate – Cooperate

Safety First, Every Incident, Every Time

INCIDENT: Saint Charles Fire

DATE: 10/28-29/2023

SHIFT: Day and Night

Safety Topics

- **Driving**
- **Prepare for Cold Weather**
- **Hunting Season Opens**

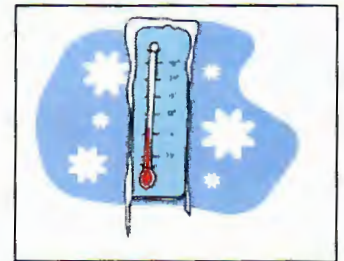
Driving with Deer or Wet Road Conditions

Driving is the highest risk activity you are doing. Watch for deer crossing the road and slow down if road conditions get wet or icy.



Prepare Yourself and Equipment for Cold Weather

Cold temperatures are in the forecast with freezing low temperatures into the teens overnight. Wear the clothing required to keep you warm. Prepare your pumps (Engine and Mobile) for the cold tonight by draining and/or using antifreeze.



2nd Rifle Season Opens Today

**It is now
HUNTING
SEASON**
**We suggest that you
WEAR ORANGE**

OR YELLOW

**Your Safety Officers: David Vitwar,
Damon McRae, Lehi Vizcaino,
Ryan Romero & Brent Johnson**



FIREFIGHTER HEALTH LINE

LINEA DE SALUD DEL BOMBERO

720.693.3188

COVID self-tests are available at briefings and by request.

Autoprebas de COVID están disponibles en la sesión informativa y previa solicitud.



Nutrition --- *6 Minutes for Safety* (excerpt)

<https://www.nwccg.gov/committee/6mfs/firefighter-nutrition>

“Consider the following key points when choosing your meal:

- There are three major energy sources in food: carbohydrates, protein, and fats.
- Carbohydrates (also called sugar) offer an immediate source of energy for your body. They provide the fuel for your muscles and organs, such as your brain.
- Proteins are the basic building blocks of the human body. They are made up of amino acids that help build muscles, blood, skin, hair, nails, and internal organs.
- Fat is an essential nutrient that provides energy, energy storage, insulation, and contour to the body.”

“Carbohydrates:

- Studies on athletes have shown that carbohydrates are the most critical energy source for performance and health.
- Carbohydrates are your body’s first choice for fuel. If given a choice of several types of foods simultaneously, your body will use the energy from carbohydrates first.
- If you do not eat enough carbohydrates, the following can occur:
 - Fatigue
 - Muscle cramps
 - Poor mental function”

~~~~~

When possible, choose complex carbohydrates (ex. brown rice, beans, oatmeal, 100% whole-wheat bread, plant foods) in place of simple carbs (ex. white bread, pasta, white rice, box cereals). They breakdown more slowly, stabilize blood sugar levels, and contain more nutrients.

## LOGISTICS MESSAGE

### Services for 10/28 & 10/29

#### ICP

|                 |                                                                        |
|-----------------|------------------------------------------------------------------------|
| Fuel            | Use local gas stations for fuel, oil, fluids                           |
| Food & Lodging  | All Responders are on per diem – no meals provided                     |
| Ground Support  | 0600 – 2130 Large Parking Area at ICP                                  |
| Mechanic / Tow  | None on site – use normal procedures for breakdowns                    |
| Supply          | 0600 – 2130 Large Parking Area at ICP                                  |
| Lunches & Water | <b><i>For Field Operations Folks</i></b> available near Ground Support |





# SAW PARTS REQUEST

Revised 21JUL2021

|                     |  |                     |  |
|---------------------|--|---------------------|--|
| <b>CREW NAME</b>    |  |                     |  |
| <b>RESOURCE #</b>   |  | <b>REQUEST DATE</b> |  |
| <b>CONTACT NAME</b> |  | <b>PICK UP DATE</b> |  |
| <b>PHONE #</b>      |  |                     |  |

## SAW INFO

|                   |             |                 |             |
|-------------------|-------------|-----------------|-------------|
| <b>MAKE</b>       | STIHL _____ | HUSQVARNA _____ | OTHER _____ |
| <b>MODEL</b>      |             |                 |             |
| <b>BAR LENGTH</b> |             |                 |             |

| AMOUNT | PART NAME & NUMBER | S # |
|--------|--------------------|-----|
|        |                    |     |
|        |                    |     |
|        |                    |     |
|        |                    |     |
|        |                    |     |
|        |                    |     |
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|        |                    |     |
|        |                    |     |
|        |                    |     |
|        |                    |     |

|                     |              |                    |                   |
|---------------------|--------------|--------------------|-------------------|
| <b># of DRIVERS</b> |              |                    |                   |
| <b>PITCH</b>        | 1/4" _____   | 3/8" _____         | .325" _____       |
| <b>GUAGE</b>        | .043 _____   | .050 _____         | .058 _____        |
| <b>TOOTH LAYOUT</b> | FULL _____   | SEMI-SKIP _____    | FULL SKIP _____   |
| <b>TOOTH CUT</b>    | CHISEL _____ | MICRO-CHISEL _____ | SEMI-CHISEL _____ |

|                            |  |                                                    |  |
|----------------------------|--|----------------------------------------------------|--|
| <b># of SPROCKET TEETH</b> |  |                                                    |  |
| <b>APPROVAL SIGNATURE</b>  |  | <b>EMAIL TO:</b><br>ROCKYMT.CIMT1.SUPPLY@GMAIL.COM |  |



# Rocky Mountain IMT1

## Line Supply Order, Non Hot Food

EMAIL TO: [ROCKYMT.CIMTI.SUPPLY@GMAIL.COM](mailto:ROCKYMT.CIMTI.SUPPLY@GMAIL.COM)

Revised: 8/04/2023

|  |                          |                                                           |                                                   |
|--|--------------------------|-----------------------------------------------------------|---------------------------------------------------|
|  | Order #<br>(BR+DIVS + #) | Location & Time for Delivery<br>(Division/LZ/DP/Lat Long) | Mode of delivery<br>(Driven/Helo/DIVS to Pick up) |
|  |                          |                                                           |                                                   |

Person placing order (name & time):

Order received in Communications by (name & time):

Order received in Transportation by (name & time):

Order received in Helibase by (name & time):

Order shipped to line unit by (name & time): (Send this sheet to the line with the order)

| #   | Item                                 | Amount | Item                                         | Amount                          |
|-----|--------------------------------------|--------|----------------------------------------------|---------------------------------|
|     | <b>Line not used</b>                 |        |                                              |                                 |
|     |                                      | 30.    | Slingable Blivet, specify size – 72 or 55 gl | ea                              |
| 1.  | Meals, MRE's cs                      |        | 31.                                          | Folding Tank, specify size ea   |
| 2.  | Water, 5 gal. cubie ea               |        | 32.                                          | Lightweight Pump Kit ea         |
| 3.  | Batteries- AA 1-Flat                 |        | 33.                                          | Hose, 1 1/2" ea                 |
| 4.  | Batteries, Specify Type pk           |        | 34.                                          | Hose, 1" ea                     |
| 5.  | Flagging, Specify type roll          |        | 35.                                          | Hose, 3/4" ea                   |
| 6.  | Gas, raw gal                         |        | 36.                                          | Reducer, 1 1/2" x 1" ea         |
| 7.  | Bar Oil gal                          |        | 37.                                          | Reducer, 1" x 3/4" ea           |
| 8.  | 2- cycle oil, chainsaw (2.5 oz) 6 pk |        | 38.                                          | Gated "Y", 1 1/2" ea            |
| 9.  | Sleeping Bags ea                     |        | 39.                                          | Gated "Y", 1" ea                |
| 10. | Gatorade cs                          |        | 40.                                          | Gated "Y", 3/4 " ea             |
| 11. | Tarps / Plastic roll                 |        | 41.                                          | Shut-off Valve, specify size ea |
| 12. | Parachute Cord roll                  |        | 42.                                          | In-line Tee, 1 1/2" x 1" ea     |
| 13. | Tool, Shovel ea                      |        | 43.                                          | Nozzle, 1 1/2" ea               |
| 14. | Tool, Pulaski ea                     |        | 44.                                          | Nozzle, 1" ea                   |
| 15. | Tool, Combi ea                       |        | 45.                                          | Nozzle, 3/4" ea                 |
| 16. | Tool, McLeod ea                      |        | 46.                                          | 20-25 Person First Aid Kit ea   |
| 17. | Tool, Specify Type ea                |        | 47.                                          | Chainsaw Kit ea                 |
| 18. | Fusee cs                             |        | 48.                                          | Toilet Paper (96 per case) cs   |
| 19. | Drip Torch ea                        |        | 49.                                          | 1000 ft. Hose Lay Kit ea        |
| 21. | Drip Torch Mix, 5 gal. ea            |        | 50.                                          | Garbage Bags bx                 |
| 22. | Coffee Kit w/propane ea              |        | 51.                                          | Leadline ea                     |
| 23. | Swivel ea                            |        | 52.                                          | Spike Supply Kit ea             |
| 24. | Backpack Pump ea                     |        | 53.                                          | Dolmar (6 per case) ea          |
| 25. | Pumpkin, specify size ea             |        | 54.                                          | Sprinkler Kit ea                |
| 26. | Mark 3 Pump ea                       |        | 55.                                          | LINE Spike Supply Kit ea        |
| 27. | Mark 3 Pump Accessory Kit ea         |        | 56.                                          | Duct Tape roll                  |
| 28. | 2-cycle oil, high pressure pump qt   |        | 57.                                          | House Wrap roll                 |
| 29. | Diesel gal.                          |        | 58.                                          | Staple Gun w/staples ea         |

**Team Ordering/Timeline Process:**

**1400- Last call for change in dinner deliver locations. Submit to the Food Unit Leader via 213 or through communications.**

**1600 - DIVS to have next day's resource order ready for Planning OPS.**

- All crew level orders will be placed through *DIVS* or Branch.
- *DIVS* or Branch will place all orders through Communications Unit.
- All orders will be tracked using the process found on the front of this form.

**Definitions**

**FOB-**Forward Operating Base is a secure forward position established to strategize, design and discuss tactics, and for personnel to transfer information and meet.

**Line Spike Camp-**Managed by Operations at the *DIVS* level; mobile, short duration and self- sufficient.

**Spike Camp-**Supported by Logistics, listed in the IAP, numbers in camp are set by 1100, named by Plans.

**Emergency Medevac-** Life threatening situation requiring immediate medical attention. Handled as per IAP med plan and team SOP's. Communications to clear command channel radio traffic.

**Medical Transport-**Transport of less serious injury/illness managed by Operations or line Medics back to camp for evaluation and/or treatment.

| 1000 ft. Hose Lay Kit<br>(Order as "#50") |              |                                      |                 | Spike Supply Kit<br>(Order as "#53") |       |                                     |                  |
|-------------------------------------------|--------------|--------------------------------------|-----------------|--------------------------------------|-------|-------------------------------------|------------------|
| Quantity                                  | NFES#        | Item                                 | Weight          | Quantity                             | NFES# | Item                                | Weight           |
| 10 ea                                     | 1239         | Hose 1½"                             | 125 lbs         | 2 rolls                              | 0071  | Duct Tape                           | 4 lbs            |
| 10 ea                                     | 1238         | Hose 1"                              | 84 lbs          | 4 rolls                              | 0222  | Fiber Tape                          | 2lbs             |
| 20 ea                                     | 1016         | Hose ¾"                              | 25 lbs          | 1 case                               | 0021  | Trash Bags                          | 21 lbs           |
| 5 ea                                      | 0231         | 1½" Gated "Y"                        | 20 lbs          | 1 case                               | 0465  | Cups for hot liquid                 | 18 lbs           |
| 5 ea                                      | 0259         | 1" Gated "Y"                         | 13 lbs          | 2 ea                                 | 0070  | 16x24 Tent fly                      | 40 lbs           |
| 10 ea                                     | 0904         | ¾" Gated "Y"                         | 3 lbs           | 3 ea                                 | 0027  | Water Wash Basins                   | 2 lbs            |
| 5 ea                                      | 0010         | Reducers 1½" - 1"                    | 3 lbs           | 1 case                               |       | Liquid Hand Soap / pump             | 10 lbs           |
| 5 ea                                      | 0733         | Reducers 1" - ¾"                     | 2 lbs           | 18 cases                             | 1842  | MRE's                               | 18 x 20= 360 lbs |
| 10 ea                                     | 0738 or 0835 | Ball Valve ¾"                        | 5 lbs           | 48 ea                                | 0022  | Sleeping bags (dbl. bag)            | 48 x 5= 240 lbs  |
| 10 ea                                     | 0138         | Nozzle, 1"                           | 5 lbs           | 3 cases                              | 0030  | AA Batteries, 24 pkg./case          | 90 lbs           |
| 10 ea                                     | 0136         | Nozzle ¾"                            | 5 lbs           | 1case                                | 0240  | Paper Towels                        | 41 lbs           |
| 5 ea                                      | 0230         | Tee 1½x1½x1"/valve                   | 5 lbs           | 1 case                               | 0142  | Toilet Paper                        | 44 lbs           |
| LINE Spike Supply Kit<br>(Order as "#56") |              |                                      |                 | 1 roll                               | 0144  | Plastic sheeting                    | 45 lbs           |
|                                           |              |                                      |                 | 1 roll                               | 0533  | P-Cord                              | 9 lbs            |
| Quantity                                  | NFES#        | Item                                 | Weight          | 20 ea                                | 7443  | Cubies, 5 gal. Full Potable Water   | 20 x 40= 800 lbs |
| 20+0H                                     | 0022         | Sleeping bags                        | 20 x 5= 100 lbs | 1 box                                | 1059  | 12" Bastard Files                   | 9lbs             |
| 20 ea                                     | 7443         | Cubies, 5 gal Full                   | 20x40= 800 lbs  | 1 ea                                 | 3444  | 2-cycle mix, chainsaw (6 pk 2.5 oz) | 2lbs             |
| 18 cases                                  | 1842         | MRE's                                | 18x20=360 lbs   | 8 gal                                | 1880  | Bar Oil                             | 64 lbs           |
| 1 sl                                      | 0533         | P-Cord                               | 9 lbs           | 15 gal                               |       | Regular Gas                         | 120 lbs          |
| 3 cases                                   | 0030         | AA Batteries, 24 pkg./case           | 90 lbs          | 1 can                                |       | 3 lbs. can coffee                   | 3 lbs            |
| 1 case                                    | 0021         | Trash bags                           | 21 lbs          | 1 ea                                 |       | 2 1/2 gal coffee pot or 3-1 gal     | 10 lbs           |
| 10 rolls                                  | 0142         | Toilet paper                         | 3 lbs           | 2ea                                  | 0089  | Ridge pole                          | 46 lbs           |
| 1 roll                                    | 0144         | Plastic sheeting                     | 45 lbs          | 12 ea                                | 0083  | Pole upright                        | 89 lbs           |
| 2 rolls                                   | 0222         | Fiber Tape                           | 2 lbs           | 24 ea                                | 0825  | Stake Tent                          | 24 lbs           |
| 1 ea                                      | 3444         | 2-cycle mix, chain-saw (6 pk 2.5 oz) | 2 lbs           |                                      |       |                                     |                  |
| 4 gal                                     | 1880         | Bar Oil                              | 32 lbs          |                                      |       |                                     |                  |
| 15 gal                                    |              | Regular Gas                          | 120 lbs         |                                      |       |                                     |                  |
| 1 box                                     | 1059         | 12" Bastard Files                    | 9 lbs           |                                      |       |                                     |                  |



# MEDICAL PLAN (ICS 206WF)

ROCKY MOUNTAIN INCIDENT MANAGEMENT

|                                                                                                               |  |                                                   |  |                               |                                                                    |                                 |  |                   |                 |                            |  |
|---------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------|--|-------------------------------|--------------------------------------------------------------------|---------------------------------|--|-------------------|-----------------|----------------------------|--|
| 1. Incident/Project Name                                                                                      |  |                                                   |  | 2. Operational Period         |                                                                    |                                 |  |                   |                 |                            |  |
| Saint Charles Fire                                                                                            |  |                                                   |  | 10/28/2023 0700-0700          |                                                                    |                                 |  |                   |                 |                            |  |
| 3. Ambulance Services                                                                                         |  |                                                   |  |                               |                                                                    |                                 |  |                   |                 |                            |  |
| Name                                                                                                          |  | Location                                          |  | Phone/Frequency               |                                                                    | Advanced Life Support (ALS)     |  |                   |                 |                            |  |
|                                                                                                               |  |                                                   |  |                               |                                                                    | Yes No                          |  |                   |                 |                            |  |
| Rye Fire Department                                                                                           |  | Rye, Colorado                                     |  | Dial 911                      |                                                                    | X                               |  |                   |                 |                            |  |
| AMR                                                                                                           |  | Pueblo, Colorado                                  |  | Dial 911                      |                                                                    | X                               |  |                   |                 |                            |  |
| 4. Air Ambulance Service                                                                                      |  |                                                   |  |                               |                                                                    |                                 |  |                   |                 |                            |  |
| Name                                                                                                          |  | Phone/Freq                                        |  | Type of Aircraft & Capability |                                                                    |                                 |  |                   |                 |                            |  |
| UC Health Lifeline                                                                                            |  | 1-844-867-4590                                    |  | Astar, NVG, Blood             |                                                                    |                                 |  |                   |                 |                            |  |
| Flight for Life                                                                                               |  | 1-800-332-3123                                    |  | Astar, NVG, Blood             |                                                                    |                                 |  |                   |                 |                            |  |
| 5. Hospitals                                                                                                  |  |                                                   |  |                               |                                                                    |                                 |  |                   |                 |                            |  |
| Name<br>Complete Address                                                                                      |  | GPS DATUM - WGS 84 DD°<br>Degrees Decimal Minutes |  | Travel Time<br>GND AIR        |                                                                    | Phone                           |  | Helipad<br>Yes No |                 | Level of Care Facility     |  |
| St Mary-Corwin<br>1008 Minnequa Ave<br>Pueblo, CO                                                             |  | Lat:<br>Long:<br>VHF:                             |  | 45 Min 15 Min                 |                                                                    | 719-557-5656                    |  | X                 |                 | Level 3<br>Limited Cardiac |  |
| Parkview Medical Center<br>400 W 16th St<br>Pueblo, CO                                                        |  | Lat:<br>Long:<br>VHF:                             |  | 45 Min 15 Min                 |                                                                    | 719-288-2100                    |  | X                 |                 | Level 3                    |  |
| Memorial Hospital Central<br>1400 E Boulder St<br>Colorado Springs, CO                                        |  | Lat:<br>Long:<br>VHF:                             |  | 90 Min 35 Min                 |                                                                    | 719-365-2410                    |  | X                 |                 | Level 1                    |  |
| UC Health Burn Center<br>12605 E 16th Ave<br>Aurora, CO                                                       |  | Lat:<br>Long:<br>VHF:                             |  | N/A 55 Min                    |                                                                    | 720-848-7583                    |  | X                 |                 | Level 1<br>ABA Burn        |  |
| Travel times above are from the Work Center to the facility and DO NOT include response time to the incident. |  |                                                   |  |                               |                                                                    |                                 |  |                   |                 |                            |  |
| 6. Division   Branch   Group                                                                                  |  |                                                   |  |                               |                                                                    |                                 |  |                   |                 |                            |  |
| DIVISION<br>A                                                                                                 |  | EMS Responders & Capability:                      |  |                               | Ambo 1 Newman, EMPF Eyerly                                         |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Equipment Available on Scene:                     |  |                               | ALS Ambulance                                                      |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Medical Emergency Channel:                        |  |                               | Command: ADOBE VMED 28                                             |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | ETA For 911 Ambulance to DIV:                     |  |                               | 35 minutes (*Incident Ambulance w/in 10 minutes)                   |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Approved Helispot:                                |  |                               | H2                                                                 |                                 |  |                   |                 |                            |  |
| DIVISION<br>D                                                                                                 |  | EMS Responders & Capability:                      |  |                               | Ambo 2 Byrd                                                        |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Equipment Available on Scene:                     |  |                               | ALS Ambulance                                                      |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Medical Emergency Channel:                        |  |                               | Command ADOBE VMED 28                                              |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | ETA For 911 Ambulance to DIV:                     |  |                               | 30 minutes (*Incident Ambulance w/in 10 minutes)                   |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Approved Helispot:                                |  |                               | H6                                                                 |                                 |  |                   |                 |                            |  |
| DIVISION<br>K                                                                                                 |  | EMS Responders & Capability:                      |  |                               | EMPF Machula                                                       |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Equipment Available on Scene:                     |  |                               | ALS                                                                |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Medical Emergency Channel:                        |  |                               | Command ADOBE VMED 28                                              |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | ETA For 911 Ambulance to DIV:                     |  |                               | 25 minutes (*Incident Ambulance w/in 10 minutes [From Div A/D])    |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Approved Helispot:                                |  |                               | H2                                                                 |                                 |  |                   |                 |                            |  |
| DIVISION<br>T                                                                                                 |  | EMS Responders & Capability:                      |  |                               | West Metro REMS                                                    |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Equipment Available on Scene:                     |  |                               | ALS - REMS                                                         |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Medical Emergency Channel:                        |  |                               | Command ADOBE VMED 28                                              |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | ETA For 911 Ambulance to DIV:                     |  |                               | 45 minutes (*Incident Ambulance w/in 20 minutes [From Div A])      |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Approved Helispot:                                |  |                               | H2                                                                 |                                 |  |                   |                 |                            |  |
| STRUCTURE<br>GROUP                                                                                            |  | EMS Responders & Capability:                      |  |                               | West Metro B13 Botsford (EMPF) / West Metro B9 Johnson (EMPF)      |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Equipment Available on Scene:                     |  |                               | ALS                                                                |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Medical Emergency Channel:                        |  |                               | Command ADOBE VMED 28                                              |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | ETA For 911 Ambulance to DIV:                     |  |                               | 30 minutes (*Incident Ambulance w/in 10 minutes [From Div A/D])    |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Approved Helispot:                                |  |                               | H6                                                                 |                                 |  |                   |                 |                            |  |
| NIGHT<br>GROUP                                                                                                |  | EMS Responders & Capability:                      |  |                               | No medical resources assigned. Identify capabilities within group. |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Equipment Available on Scene:                     |  |                               |                                                                    |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Medical Emergency Channel:                        |  |                               | Command ADOBE VMED 28                                              |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | ETA For Ambulance to DIV A/D/K:                   |  |                               | 20 minutes + Dispatch Time (*911 Activation)                       |                                 |  |                   |                 |                            |  |
|                                                                                                               |  | Helicopter Landing Zone:                          |  |                               | Lake Isabel Work Center Helipad                                    |                                 |  |                   |                 |                            |  |
| 7. Prepared By (Medical Unit Leader)                                                                          |  |                                                   |  | 8. Date/Time                  |                                                                    | 9. Reviewed By (Safety Officer) |  |                   | 10. Date/Time   |                            |  |
| Neil Meach MEDL(t)                                                                                            |  |                                                   |  | 10/28/2023 1900               |                                                                    | David Vitwar SOF1               |  |                   | 10/28/2023 1900 |                            |  |



# MEDICAL PLAN (ICS 206 WF)

Controlled Unclassified Information//Basic

| Medical Incident Report                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------|---------------|------------|----------|---------------------|--------------|------------|---------------|------------|---------|--|--|--|--|--|-------------|--|--|--|--|--|----------|--|--|--|--|--|
| <p><b>FOR A NON-EMERGENCY INCIDENT, WORK THROUGH CHAIN OF COMMAND TO REPORT AND TRANSPORT INJURED PERSONNEL AS NECESSARY.</b></p> <p><b>FOR A MEDICAL EMERGENCY: IDENTIFY ON SCENE INCIDENT COMMANDER BY NAME AND POSITION AND ANNOUNCE "MEDICAL EMERGENCY" TO INITIATE RESPONSE FROM IMT COMMUNICATIONS/DISPATCH.</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| <p><b>Use the following items to communicate situation to communications/dispatch.</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| <p><b>1. CONTACT COMMUNICATIONS / DISPATCH</b> (Verify correct frequency prior to starting report)<br/> <i>Ex: "Communications, Div. Alpha. Stand-by for Emergency Traffic."</i></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| <p><b>2. INCIDENT STATUS:</b> Provide incident summary (including number of patients) and command structure.<br/> <i>Ex: "Communications, I have a Red priority patient, unconscious, struck by a falling tree. Requesting air ambulance to Forest Road 1 at (Lat./Long.) This will be the Trout Meadow Medical, IC is TFLD Jones. EMT Smith is providing medical care."</i></p>                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| Severity of Emergency / Transport Priority                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> <b>RED / PRIORITY 1 Life or limb threatening injury or illness. Evacuation need is IMMEDIATE</b><br><i>Ex: Unconscious, difficulty breathing, bleeding severely, 2<sup>o</sup> - 3<sup>o</sup> burns more than 4 palm sizes, heat stroke, disoriented.</i><br><input type="checkbox"/> <b>YELLOW / PRIORITY 2 Serious Injury or illness. Evacuation may be DELAYED if necessary.</b><br><i>Ex: Significant trauma, unable to walk, 2<sup>o</sup> - 3<sup>o</sup> burns not more than 1-3 palm sizes.</i><br><input type="checkbox"/> <b>GREEN / PRIORITY 3 Minor Injury or illness. Non-Emergency transport</b><br><i>Ex: Sprains, strains, minor heat-related illness.</i> |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| Nature of Injury or Illness & Mechanism of Injury                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              | <i>Brief Summary of Injury or Illness<br/>(Ex: Unconscious, Struck by Falling Tree)</i> |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| Transport Request                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              | <i>Air Ambulance / Short Haul/Hoist<br/>Ground Ambulance / Other</i>                    |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| Patient Location                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              | <i>Descriptive Location &amp; Lat. / Long. (WGS84)</i>                                  |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| Incident Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              | <i>Geographic Name + "Medical"<br/>(Ex: Trout Meadow Medical)</i>                       |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| On-Scene Incident Commander                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              | <i>Name of on-scene IC of Incident within an Incident (Ex: TFLD Jones)</i>              |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| Patient Care                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              | <i>Name of Care Provider<br/>(Ex: EMT Smith)</i>                                        |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| <p><b>3. INITIAL PATIENT ASSESSMENT:</b> Complete this section for each patient as applicable (start with the most severe patient)</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| <p>Patient Assessment: See IRPG page 106</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| <p>Treatment:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| <p><b>4. TRANSPORT PLAN:</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| <p>Evacuation Location (if different): (Descriptive Location (drop point, intersection, etc.) or Lat. / Long.) Patient's ETA to Evacuation Location:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| <p>Helispot / Extraction Site Size and Hazards:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| <p><b>5. ADDITIONAL RESOURCES / EQUIPMENT NEEDS:</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| <p><i>Example: Paramedic/EMT, Crews, Immobilization Devices, AED, Oxygen, Trauma Bag, IV/Fluid(s), Splints, Rope rescue, Wheeled litter, HAZMAT, Extrication</i></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| <p><b>6. COMMUNICATIONS: Identify State Air/Ground EMS Frequencies and Hospital Contacts as applicable</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Function</th> <th style="width: 20%;">Channel Name/Number</th> <th style="width: 20%;">Receive (RX)</th> <th style="width: 15%;">Tone/NAC *</th> <th style="width: 20%;">Transmit (TX)</th> <th style="width: 10%;">Tone/NAC *</th> </tr> </thead> <tbody> <tr> <td>COMMAND</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>AIR-TO-GRND</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>TACTICAL</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            | Function | Channel Name/Number | Receive (RX) | Tone/NAC * | Transmit (TX) | Tone/NAC * | COMMAND |  |  |  |  |  | AIR-TO-GRND |  |  |  |  |  | TACTICAL |  |  |  |  |  |
| Function                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Channel Name/Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Receive (RX) | Tone/NAC *                                                                              | Transmit (TX) | Tone/NAC * |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| COMMAND                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| AIR-TO-GRND                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| TACTICAL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| <p><b>7. CONTINGENCY: Considerations:</b> If primary options fail, what actions can be implemented in conjunction with primary evacuation method? Be thinking ahead.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| <p><b>8. ADDITIONAL INFORMATION:</b> Updates/Changes, etc.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |
| <p><b>REMEMBER:</b> Confirm ETA's of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |              |                                                                                         |               |            |          |                     |              |            |               |            |         |  |  |  |  |  |             |  |  |  |  |  |          |  |  |  |  |  |